(OFFICE USE ONLY)
DEALERS' LICENSE &
REGULATIONS OFFICE
DATE RECEIVED:

STATE OF RHODE ISLAND AND PROVIDENCE PLANTATIONS

RHODE ISLAND DEALERS' LICENSE & REGULATIONS OFFICE DIVISION OF MOTOR VEHICLES

286 Main Street Room 307 Pawtucket, RI 02860 (401) 588-3020 Ext. 2076

COMPLAINT#

I wish to file a complaint against the dealership, manufacturer, and/or distributor named below. I understand the Dealers' License & Regulations Office does not act as an attorney for an individual, but rather represents the State of Rhode Island in enforcing automobile laws falling in the jurisdiction of this office.

	Date:					
(Please print or type)						
COMPLAINANT'S NAME:			-			
ADDRESS:						
NO. STREET	CITY/TOWN	STATE	ZIP CODE			
HOME TELEPHONE#:	ME TELEPHONE#:BUSINESS TELEPHONE#:					
YOUR DRIVER'S LICENSE#:						
NAME OF DEALERSHIP:						
ADDRESS OF DEALERSHIP:						
NO. STREET			ZIP CODE			
DEALERSHIP'S TELEPHONE#:						
DATE OF TRANSACTION:	_TOTAL PRICE P	PAID:				
SALES PERSON/AGENT:						
VEHICLE YEAR - MAKE - MODEL:						
ODOMETER READING AT TIME OF SALE:PRESENT READING:						
IF VEHICLE IS REGISTERED, WHAT IS YOUR REGISTRATION PLATE#:						
DO YOU HAVE A LIEN ON THIS VEHICLE?IF YES, WITH WHOM?						
HAVE YOU CONTACTED ANY OTHER AGENCIES IF YES, LIST BELOW:						
HAVE YOU CONTACTED A PRIVATE ATTORNI	EY?IF SO,	STATE NAME &	ADDRESS:			

		COMPLAINT#			
Α.	WHAT TYPE OF WARRANTY DID YOU AGREE TO?				
В.	HOW LONG OF A WARRANTY DID YOU RECEIVE?				
c.	ON WHAT FACTS DO YOU BASE YOUR COMPLAINT?	PLEASE EXPLAIN IN DETÀIL:			
D.	WHAT SETTLEMENT ARE YOU SEEKING?				
					
	THIS COMPLAINT MUST BE COMPLETED AND COPIES OF ALL SUPPORTING DOCUMENTS ATTACHED. SUCH AS COPY OF BILL-OF-SALE, PURCHASE ORDER AGREEMENT, SAFETY REJECTION SLIP (IF UNABLE TO PASS INSPECTION), REPAIR RECEIPTS, COPY OF WARRANTY OR GUARANTEES.				
	IF YOU SUSPECT THAT THIS MAY BE A FRAUDULENT OR OTHERWISE ILLEGAL TRANSACTION, IT IS ADVISED THAT YOU CONTACT YOUR LOCAL POLICE DEPARTMENT, STATE POLICE, OR F.B.I. OFFICE REGARDING THIS MATTER.				
	(YOU MAY USE ADDITIONAL PAGES TO EXPLAIN YOUR ANSWERS).				
		COMPLAINANT'S SIGNATURE			
		DATE:			